

Application for Remote Access

Application Checklist

To ensure there are no delays in the creation of your account(s) due to incorrectly submitted documents, please locate your method of applying below and review the following steps. This checklist is provided for your convenience and should not be included with your submission.

Please do not use correction fluid or tape and if any corrections must be made, that they are initialed by both the individual who signed the application and the notary.

If applying as an individual, did you:	
<input type="checkbox"/>	Initial the bottom of the page?
<input type="checkbox"/>	Write 'N/A' on the 'Business Name' line?
<input type="checkbox"/>	Sign the 'Signature' line?
<input type="checkbox"/>	Have the application notarized?
<input type="checkbox"/>	Include one fully executed Business Subscriber Agreement and an Individual Subscriber Agreement for yourself?

If applying as a user for a business with no existing accounts, did you:	
<input type="checkbox"/>	Initial the bottom of the page?
<input type="checkbox"/>	Write the business' name on the 'Business Name' line?
<input type="checkbox"/>	Sign the 'Signature' line?
<input type="checkbox"/>	Have the application notarized?
<input type="checkbox"/>	Include one fully executed Business Subscriber Agreement and an Individual Subscriber Agreement for yourself?

If applying as a user for a business with existing accounts, did you:	
<input type="checkbox"/>	Initial the bottom of the page?
<input type="checkbox"/>	Write the business' name on the 'Business Name' line?
<input type="checkbox"/>	Sign the 'Signature' line?
<input type="checkbox"/>	Have the application notarized?
<input type="checkbox"/>	Include one fully executed Individual Subscriber Agreement and a message on company letterhead from an officer of the company requesting an account for you by name?

This document, related documents and instructions can be found at:

<http://www.fairfaxcounty.gov/courts/circuit/cpan>

APPLICATION FOR REMOTE ACCESS TO THE COURT PUBLIC ACCESS NETWORK (CPAN)

This application must be completed by each individual user.

The approval of this application is at the Clerk of the Circuit Court's discretion. By signing this application, the subscriber acknowledges and accepts the terms and conditions of the *Individual Subscriber Agreement for Remote Access* as incorporated by reference herein. **All Information below is mandatory.**

APPLICANT'S LAST NAME: _____

APPLICANT'S FIRST NAME: _____

BUSINESS NAME (or N/A): _____

STREET ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE NUMBER: _____

E-MAIL ADDRESS: _____

UNITED STATES CITIZEN: Yes ☐ No ☐ Please select one.

SIGNATURE: _____

I certify that the information above is true and correct.

CITY/COUNTY OF: _____

STATE OF: _____

I, _____, a Notary Public, do hereby certify that on this _____
(Name of Notary)

day of _____, 20____, _____ personally
(Name of Applicant)

appeared before me and swore and acknowledged that the statements contained herein are true and correct.

My Commission Expires: _____
Notary Public Signature

Registration Number: _____
Print or Type Name of Notary